PTO/SB/17 (10-08)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE to a collection of information unless it displays a valid OMB control number.

Officer the Fa	perwork Reduction Act of	respond to a conection	_			CONTROL HUMBE		
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).						plete if Known 10/590,846-Conf. #4142		
FEE TRANSMITTAL				7 tppiroditori i tarrisori		August 25, 2006		
				First Named Inventor Masaharu UEDA		****		
For FY 2009				Examiner Name C. A. Fogarty				
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 1793				
TOTAL AMOUNT OF PAYMENT (\$) 1,430.00					1551-0158PUS1			
L								
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order Other (please identify):								
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
X Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
	FI	LING FEES	SE	ARCH FEES	EXAMINA	ATION FEES		
Application Ty	/pe <u>Fee (</u> \$	Small Entity Fee (\$)	Fee (	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)
Utility	330		540	270	220	110		
Design	220	110	100	50	140	70		
Plant	220	110	330	165	170	85		
Reissue	330	165	540	270	650	325		
Provisional	220	110	0	0	0	0		
2. EXCESS CLAIM FEES Small Entity								
Fee Description Each claim over 20 (including Reissues)  Fee (\$) F							<u>Fee (\$)</u> 26	
Each independent claim over 3 (including Reissues)							220	110
Multiple dependent claims 390 195								195
Total Claims			ee Paid (\$)	<b>Multiple Dependent Claims</b>				
10 - or 20 = x =				<u>Fee</u>	<u>(\$)</u> <u>F</u>	ee Paid (\$	)	
HP = highest number of total claims paid for, if greater than 20.  Indep. Claims Extra Claims Fee (\$)		F	Fee Paid (\$)		<del></del> -	<del>.</del>	<del></del>	
	- or 3 =	x =		σο: αια ( <del>ψ</del> )				
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
100 = /50 = (round up to a whole number) x =								
4. OTHER FEE(S) Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 810.00 1253 Extension for response within third month 620.00								
SUBMITTED BY								
Registration No. 32 181 Telephone (703) 205-8000								
	Mara & Wainer	20 1001	-1	(Attorney/Agent)		1	L 022	
Name (Print/Type)	Marc S. Weiner					Date JU	L V # 4	003